

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>me</i>		04/12/01
O.I.P.E. CLASSIFIER		1027	10 3-3-01
FORMALITY REVIEW	<i>SP</i>	907	06/04/01
RESPONSE FORMALITY REVIEW	<i>HC</i>	712	9-21-01
			08-06-01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
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Claim	Date
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